Debtor 1	mation to identify your Gregrory Lee Sch			
	First Name	Middle Name	Last Name	
Debtor 2	Sarah Jean Schro	eder		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN	
_	20-30611-JDA			
(if known)				☐ Check if this is an amended filing
				Ç
Official Fo	rm 106Sum			
			nd Certain Statistical Information	

information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		V	4-
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	118,800.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	117,044.65
	1c. Copy line 63, Total of all property on Schedule A/B	\$	235,844.65
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	163,023.87
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,402.00
	Your total liabilities	\$	181,425.87
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,063.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,606.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal	family or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

11,051.53

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	10,947.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	10,947.00

Debtor 1	Gregrory Lee Schroeder			
		Name Last Name		
Debtor 2 Spouse, if filing)	Sarah Jean Schroeder First Name Middle	Name Last Name		
		DISTRICT OF MICHIGAN		
Tilled Clates B	Energia	DIGITALET OF WHICH HO, WY		
ase number	20-30611-JDA			☐ Check if this is a amended filing
official Fo	orm 106A/B			
	le A/B: Property			12/15
□ No. Go to Pa		ny residence, building, land, or similar property?		
1		What is the property? Check all that apply		
3404 W. I	Frances Rd.	What is the property? Check all that apply Single-family home	Do not deduct secur	ed claims or exemptions. Put
	Frances Rd. s, if available, or other description		the amount of any se	ed claims or exemptions. Put ecured claims on <i>Schedule D:</i> Claims Secured by Property.
3404 W. I	s, if available, or other description MI 48420-8537	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any si Creditors Who Have Current value of th entire property?	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
3404 W. I	s, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$118,800.	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? States of your ownership interest on the portion by the entireties, of
3404 W. I	s, if available, or other description MI 48420-8537	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$118,800. Describe the nature (such as fee simple a life estate), if known as fee state), if known as fee state).	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Secured by Property. 118,800.0 of your ownership interest of tenancy by the entireties, own. Spicet to First and
3404 W. I	MI 48420-8537 State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$118,800. Describe the nature (such as fee simple a life estate), if known fee Simple Sul	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Secured by Property. 118,800.0 of your ownership interest of tenancy by the entireties, own. Spicet to First and
3404 W. I	MI 48420-8537 State ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$118,800. Describe the nature (such as fee simple a life estate), if known Fee Simple Sul Second Mortgat	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Secured by Property. 118,800.0 of your ownership interest of tenancy by the entireties, cown. Spicet to First and

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debt		arah Jean Schroeder		Case number (if known)	20-30611-JDA
. Ca	ırs, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
	Nο				
	Yes				
_	163				
3.1	Make: Chrysler		Who has an interest in the property? Check one		red claims or exemptions. Put
0	Model:	Pacifica	■ Debtor 1 only		ecured claims on Schedule D: Claims Secured by Property.
	Year:	2018	Debtor 2 only	Current value of th	
	Approxir	mate mileage: 31000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	\square At least one of the debtors and another		
	VIN#20	C4RC1FG9JR128320	☐ Check if this is community property	\$20,000.	920,000.00
			(see instructions)		
				De ret de duet es eu	
3.2	Make:	GMC	Who has an interest in the property? Check one		red claims or exemptions. Put ecured claims on <i>Schedule D:</i>
	Model:	Acadia	Debtor 1 only	Creditors Who Have	e Claims Secured by Property.
	Year:	2013	Debtor 2 only	Current value of th	
		nate mileage: 83732 formation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		GKKVTKD4DJ163461	At least one of the deptors and another		
			☐ Check if this is community property	\$18,000.	90 \$18,000.00
			(see instructions)		
5 A	dd the do	ollar value of the portion you ow	n for all of your entries from Part 2, including	any entries for	****
.p	ages you	have attached for Part 2. Write t	that number here	=>	\$38,000.00
Part	Descri	be Your Personal and Household Ite	ems		
			erest in any of the following items?		Current value of the
Ε	xamples:				Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	goods and furnishings Major appliances, furniture, linens,	erest in any of the following items?		portion you own? Do not deduct secured
_			erest in any of the following items?		portion you own? Do not deduct secured
		Major appliances, furniture, linens,	erest in any of the following items?		portion you own? Do not deduct secured claims or exemptions.
		Major appliances, furniture, linens,	erest in any of the following items?		portion you own? Do not deduct secured claims or exemptions.
. EI	Yes. De	Major appliances, furniture, linens, scribe Misc. Househole	d Goods and Furnishings eo, stereo, and digital equipment; computers, prince	nters, scanners; music co	portion you own? Do not deduct secured claims or exemptions. \$3,300.0
. EI	Yes. De	Major appliances, furniture, linens, scribe Misc. Househole Televisions and radios; audio, vide including cell phones, cameras, m	d Goods and Furnishings eo, stereo, and digital equipment; computers, prince	nters, scanners; music co	portion you own? Do not deduct secured claims or exemptions. \$3,300.0
: EI	Yes. De	Major appliances, furniture, linens, scribe Misc. Househole Televisions and radios; audio, vide	d Goods and Furnishings eo, stereo, and digital equipment; computers, prince	nters, scanners; music co	portion you own? Do not deduct secured claims or exemptions. \$3,300.0
EI E	ectronics xamples: No Yes. De pliectibles xamples:	Major appliances, furniture, linens, scribe Misc. Househole Televisions and radios; audio, vide including cell phones, cameras, mescribe s of value	d Goods and Furnishings eo, stereo, and digital equipment; computers, princedia players, games		portion you own? Do not deduct secured claims or exemptions. \$3,300.0
El E	ectronics xamples: No Yes. De pliectibles xamples:	Major appliances, furniture, linens, scribe Misc. Househole Televisions and radios; audio, vide including cell phones, cameras, mescribe s of value Antiques and figurines; paintings,	d Goods and Furnishings eo, stereo, and digital equipment; computers, princedia players, games		portion you own? Do not deduct secured claims or exemptions. \$3,300.0 Blections; electronic devices
7. EI E	ectronics xamples: No Yes. De	Major appliances, furniture, linens, scribe Misc. Househole Televisions and radios; audio, vide including cell phones, cameras, mescribe s of value Antiques and figurines; paintings,	d Goods and Furnishings eo, stereo, and digital equipment; computers, princedia players, games		portion you own? Do not deduct secured claims or exemptions. \$3,300.00
7. EI E	ectronics xamples: No Yes. De	Major appliances, furniture, linens, scribe Misc. Household Televisions and radios; audio, vide including cell phones, cameras, mescribe s of value Antiques and figurines; paintings, other collections, memorabilia, collections, memorabilia, collections, memorabilia, collections.	d Goods and Furnishings eo, stereo, and digital equipment; computers, princedia players, games		portion you own? Do not deduct secured claims or exemptions. \$3,300.00

Official Form 106A/B Schedule A/B: Property page 2

		Bregrory Lee Schroeder Barah Jean Schroeder	Case number (if known)	20-30611-JDA
9.	Examples:	for sports and hobbies Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables musical instruments	, golf clubs, skis; canoes	and kayaks; carpentry tools;
10	. Firearms			
	□ No ■ Yes. De	: Pistols, rifles, shotguns, ammunition, and related equipment		
	_ 103. DC	12-gauge Shotgun		\$300.00
11	. Clothes Examples. □ No ■ Yes. De	Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
		Mr. and Mrs. Wardrobe		\$1,500.00
12	. Jewelry Examples. □ No ■ Yes. De	: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom	jewelry, watches, gems, ς	gold, silver
		Mrs. Wedding Bank/Engagement Ring		\$2,500.00
		Mr. Wedding Band		\$100.00
		Mrs. real Jewelry (gold bracelets)		\$500.00
13	. Non-farm : Examples: No Yes. De	: Dogs, cats, birds, horses		
		3 Dogs, 3 Cats		\$500.00
14	■ No	personal and household items you did not already list, including any health	aids you did not list	
15		dollar value of all of your entries from Part 3, including any entries for pages 3. Write that number here	s you have attached	\$8,700.00
		be Your Financial Assets		
D	o you own o	or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No	: Money you have in your wallet, in your home, in a safe deposit box, and on hand	d when you file your petiti	on

Official Form 106A/B Schedule A/B: Property page 3

Debtor 2 Sarah Jean S			Case number	r (if known)	20-30611-JDA
			ounts; certificates of deposit; shares in credit unions, s with the same institution, list each.	brokerage l	houses, and other similar
□ No			Institution name:		
■ Yes			Wayne Westland Credit Union		
			·		¢ E 222 20
	17.1.	Checking	Acct. X59332		\$5,322.29
			Chase Bank		
	17.2.	Checking	Acct. #X1282		\$654.33
			Security Credit Union		
	17.3.	Savings	Acct. #6802		\$108.86
■ No □ Yes 19. Non-publicly traded storioint venture ■ No □ Yes. Give specific info 20. Government and corpo Negotiable instruments i Non-negotiable instrume ■ No	rmation National Rate bornclude pents are	Institution or issued interests in incorporate about them	orated and unincorporated businesses, including		et in an LLC, partnership, and
 ☐ Yes. Give specific information 21. Retirement or pension and Examples: Interests in IF ☐ No ☐ Yes. List each account 	Issi accoun RA, ERIS separat	uer name: t s SA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or pro	ofit-sharing	plans
					\$44.040.00
	401(l	K)	Mr. 401k through TIAA		\$44,313.96
	401(l	k)	Mrs. 401k though Fidelity		\$8,883.14
			Mr. 401k through Vanguard		\$9,500.00
	deposit	ts you have made s	o that you may continue service or use from a compar public utilities (electric, gas, water), telecommunication Institution name or individual:		nies, or others
■ No	•	dic payment of mon	ey to you, either for life or for a number of years)		
24. Interests in an education 26 U.S.C. §§ 530(b)(1), 5.	n IRA, i i 29A(b),	n an account in a o and 529(b)(1).	ualified ABLE program, or under a qualified state	tuition pro	ogram.
■ No Official Form 106A/B			Schedule A/B: Property		page 4

Schedule A/B: Property page 4 Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com $20\text{-}30611\text{-jda} \quad Doc \ 13 \quad Filed \ 03/19/20 \quad Entered \ 03/19/20 \ 14:00:12 \quad Page \ 6 \ of \ 32$

	ebtor 1 ebtor 2		Lee Schroeder an Schroeder		C	ase number (if known)	20-30611-JDA
	☐ Yes		Institution name a	nd description. Separately file the re	cords of any intere	sts.11 U.S.C. § 521(c):	
25.	■ No	•		property (other than anything lis	ted in line 1), and	rights or powers exe	ercisable for your benefit
	⊔ Yes.	Give specific	c information about t	nem			
	Examp ■ No	oles: Internet	domain names, web	e secrets, and other intellectual prosites, proceeds from royalties and lie		ts	
			c information about t				
	Examp ■ No	oles: Building		censes, cooperative association hole	dings, liquor licens	es, professional licens	es
	☐ Yes.	Give specific	c information about t	nem			
M	oney or _l	property ow	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref □ No	unds owed	to you				
	Yes.	Give specific	information about th	em, including whether you already f	filed the returns an	d the tax years	
				2020 Tax Year Pro-Rata Tax & State of Michigan)	Refunds (IRS	Federal	\$950.00
2 9.	Examp No		e or lump sum alimo	ny, spousal support, child support, m	naintenance, divord	ce settlement, property	settlement
30.		oles: Unpaid v		rrance payments, disability benefits, lade to someone else	sick pay, vacation	pay, workers' compet	nsation, Social Security
		Give specific	c information				
31.		ts in insurar oles: Health, o		rance; health savings account (HSA)); credit, homeown	er's, or renter's insurar	nce
	Yes.	Name the ins	surance company of Company ı	each policy and list its value. name:	Beneficiar	y:	Surrender or refund value:
			Hartford Employn	Term Policy-Benefit of ent	Sarah So	chroeder	\$0.00
			Hartford employm	Term Policy-benefit of ent	Gregory	Schroeder	\$0.00
32.	If you a			u from someone who has died , expect proceeds from a life insural	nce policy, or are c	currently entitled to reco	eive property because
	■ No	Ohra saasifi	. in famous sti				
	⊔ Yes.	Give specific	c information				

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Gregrory Lee Schroede Sarah Jean Schroeder	Case number (if known)	20-30611-JDA
	er or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue	
34. Other contingent and unliquidated ☐ No ■ Yes. Describe each claim	claims of every nature, including counterclaims of the debtor and rights to	set off claims
	Contingent Claim Against Midland Funding for Pre-Petition Garnishment of 2019 State of Michigan Income Tax Refunds	\$512.07
35. Any financial assets you did not all ■ No □ Yes. Give specific information	ready list	
	entries from Part 4, including any entries for pages you have attached	\$70,244.65
Part 5: Describe Any Business-Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable ■ No. Go to Part 6. □ Yes. Go to line 38.	le interest in any business-related property?	
Part 6: Describe Any Farm- and Commerci If you own or have an interest in farm	ial Fishing-Related Property You Own or Have an Interest In. land, list it in Part 1.	
 46. Do you own or have any legal or ed ■ No. Go to Part 7. ☐ Yes. Go to line 47. 	quitable interest in any farm- or commercial fishing-related property?	
Part 7: Describe All Property You Ow	n or Have an Interest in That You Did Not List Above	
53. Do you have other property of any Examples: Season tickets, country of the season season season	lub membership	
Lawn	Mower, Weed Wacker	\$100.00
54. Add the dollar value of all of your	entries from Part 7. Write that number here	\$100.00
		<u> </u>

Official Form 106A/B Schedule A/B: Property page 6

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$118,800.00
56.	Part 2: Total vehicles, line 5	\$38,000.00		
57.	Part 3: Total personal and household items, line 15	\$8,700.00		
58.	Part 4: Total financial assets, line 36	\$70,244.65		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$100.00		
62.	Total personal property. Add lines 56 through 61	\$117,044.65	Copy personal property total	\$117,044.65
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$235,844.65

Fill in this infor	rmation to identify your	case:		
Debtor 1	Gregrory Lee Sch	roeder		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number	20-30611-JDA			
(if known)	20-30011-3DA			☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as E	Exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
D	ebtor 1 Exemptions									
	3404 W. Frances Rd. Clio, MI 48420-8537 Genesee County	\$118,800.00		\$14,000.00	11 U.S.C. § 522(d)(1)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2018 Chrysler Pacifica 31000 miles VIN#2C4RC1FG9JR128320	\$20,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)					
	Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit							
	Misc. Household Goods and Furnishings	\$3,300.00		\$1,650.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	12-gauge Shotgun Line from Schedule A/B: 10.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)					
	Line Holli Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit						
	Mr. and Mrs. Wardrobe Line from Schedule A/B: 11.1	\$1,500.00		\$750.00	11 U.S.C. § 522(d)(3)					
	Line nom Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit						

Official Form 106C

Schedule C: The Property You Claim as Exempt

20-30611-JDA Case number (if known)

or 2 Sarah Jean Schroeder			Case number (if known)	20-30611-JDA
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Mr. Wedding Band ine from Schedule A/B: 12.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B: 12.2			100% of fair market value, up to any applicable statutory limit	
B Dogs, 3 Cats	\$500.00		\$183.96	11 U.S.C. § 522(d)(5)
		☐ 100% of fair market value, up to any applicable statutory limit		
Checking: Wayne Westland Credit	\$5,322.29		\$2,661.15	11 U.S.C. § 522(d)(5)
Acct. X59332 ine from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank	\$654.33		\$327.17	11 U.S.C. § 522(d)(5)
Acct. #X1282 ine from <i>Schedule A/B</i> : 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: Security Credit Union	\$108.86		\$54.43	11 U.S.C. § 522(d)(5)
Acct. #6802 ine from <i>Schedule A/B</i> : 17.3			100% of fair market value, up to any applicable statutory limit	
No1(k): Mr. 401k through TIAA ine from Schedule A/B: 21.1	\$44,313.96	_	\$44,313.96	11 U.S.C. § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	
Mr. 401k through Vanguard ine from Schedule A/B: 21.3	\$9,500.00		\$9,500.00	11 U.S.C. § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	
Federal: 2020 Tax Year Pro-Rata Tax Refunds (IRS & State of Michigan)	\$950.00		\$475.00	11 U.S.C. § 522(d)(5)
ine from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
Hartford Term Policy-Benefit of Employment	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Sarah Schroeder ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
dartford Term Policy-benefit of employment	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Gregory Schroeder ine from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
Contingent Claim Against Midland Funding for Pre-Petition	\$512.07		\$256.04	11 U.S.C. § 522(d)(5)
Garnishment of 2019 State of Michigan Income Tax Refunds Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Debtor 1 Debtor 2	Sarah Jean Schroeder		Case number (if known)	20-30611-JDA
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	n Mower, Weed Wacker from Schedule A/B: 53.1	\$100.00	\$50.00	11 U.S.C. § 522(d)(3)
Lille	nom schedule Arb. 33.1		□ 100% of fair market value, up to any applicable statutory limit	
(Sub	you claiming a homestead exemption ject to adjustment on 4/01/22 and every No		0 ses filed on or after the date of adjustme	nt.)
	Yes. Did you acquire the property cove	red by the exemption wi	thin 1,215 days before you filed this case	?
	□ No			
	☐ Yes			

Fill in this info	rmation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2 Sarah Jean Schroeder				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case number	20-30611-JDA			
(if known)	20 00011 00A			☐ Check if this is an amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.					
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	s.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	m Check only one box for each exemption.			
De	ebtor 2 Exemptions					
	2013 GMC Acadia 83732 miles VIN#1GKKVTKD4DJ163461	\$18,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)	
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
	Misc. Household Goods and Furnishings	\$3,300.00		\$1,650.00	11 U.S.C. § 522(d)(3)	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Mr. and Mrs. Wardrobe Line from Schedule A/B: 11.1	\$1,500.00		\$750.00	11 U.S.C. § 522(d)(3)	
	Line non schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	Mrs. Wedding Bank/Engagement	\$2,500.00		\$1,700.00	11 U.S.C. § 522(d)(4)	
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Schedule C: The Property You Claim as Exempt

	Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Mrs. Wedding Bank/Engagement	\$2,500.00	•	\$800.00	11 U.S.C. § 522(d)(5)
	Ring Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	Mrs. real Jewelry (gold bracelets) Line from Schedule A/B: 12.3	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	3 Dogs, 3 Cats Line from Schedule A/B: 13.1	\$500.00		\$316.04	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Checking: Wayne Westland Credit Union	\$5,322.29		\$2,661.15	11 U.S.C. § 522(d)(5)
	Acct. X59332 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Bank	\$654.33		\$327.17	11 U.S.C. § 522(d)(5)
	Acct. #X1282 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Security Credit Union	\$108.86		\$54.43	11 U.S.C. § 522(d)(5)
	Acct. #6802 Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	401(k): Mrs. 401k though Fidelity Line from Schedule A/B: 21.2	\$8,883.14		\$8,883.14	11 U.S.C. § 522(d)(12)
				100% of fair market value, up to any applicable statutory limit	
	Federal: 2020 Tax Year Pro-Rata Tax Refunds (IRS & State of Michigan)	\$950.00		\$475.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Contingent Claim Against Midland Funding for Pre-Petition	\$512.07		\$256.03	11 U.S.C. § 522(d)(5)
	Garnishment of 2019 State of Michigan Income Tax Refunds Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
	Lawn Mower, Weed Wacker Line from Schedule A/B: 53.1	\$100.00		\$50.00	11 U.S.C. § 522(d)(3)
	Ellie Holli Osificade 702. GG. 1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover	3 years after that for ca	ases fi		
	□ No □ Yes				

Schedule C: The Property You Claim as Exempt Official Form 106C

page 5 of 6

Debtor 1 Debtor 2 Gregrory Lee Schroeder Sarah Jean Schroeder

Case number (if known)

20-30611-JDA

Fill in this information to identif	y your case:					
Debtor 1 Gregrory L	ee Schroeder					
First Name	Middle Name	Last Name				
	Schroeder	L t NI				
(Spouse if, filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court fo	or the: EASTERN DISTRICT OF MICH	IGAN				
Case number 20-30611-JDA						
(if known)					if this is an	
				amend	led filing	
Official Form 106D						
	W II 61 : 6					
Schedule D: Credit	ors Who Have Claims S	Securea	by Propert	У	12/15	
Be as complete and accurate as pos	sible. If two married people are filing togethe	er, both are equa	ılly responsible for sı	upplying correct informa	tion. If more space	
is needed, copy the Additional Page,	fill it out, number the entries, and attach it to					
number (if known).						
1. Do any creditors have claims secu						
☐ No. Check this box and sul	omit this form to the court with your other s	schedules. You	have nothing else t	to report on this form.		
Yes. Fill in all of the information	ation below.					
Part 1: List All Secured Clain	18					
	r has more than one secured claim, list the cred	litor senarately	Column A	Column B	Column C	
for each claim. If more than one credit	for has a particular claim, list the other creditors	in Part 2. As	Amount of claim	Value of collateral	Unsecured	
much as possible, list the claims in alp	habetical order according to the creditor's name).	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Chrysler Capital	Describe the property that secures the	ne claim:	\$37,800.00	\$20,000.00	\$17,800.00	
Creditor's Name	2018 Chrysler Pacifica 31000		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	<u> </u>		
	VIN#2C4RC1FG9JR128320					
	A softh data of the data is a					
P.O. Box 961275	As of the date you file, the claim is: C apply.	Check all that				
Fort Worth, TX 76161	Contingent					
Number, Street, City, State & Zip Cod	e Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	☐ An agreement you made (such as m	nortgage or secur	ed			
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)				
At least one of the debtors and and	other U Judgment lien from a lawsuit					
☐ Check if this claim relates to a	Other (including a right to offset)	Purchase Mo	oney Security			
community debt						
Date debt was incurred 7/2018	Last 4 digits of account number	er 9890				
2.2 NewRez LLC	Describe the property that secures the	ne claim:	\$70,867.15	\$118,800.00	\$0.00	
Creditor's Name	3404 W. Frances Rd. Clio, MI		V. 0,001110	<u> </u>		
1100 Virginia Drive	48420-8537 Genesee County					
Ste. 125	As of the date you file, the claim is: C	No and a state of				
Fort Washington, PA	apply.	neck all that				
19034	Contingent					
Number, Street, City, State & Zip Cod	e Unliquidated					
	Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	An agreement you made (such as m	nortgage or secur	red			
Debtor 2 only	car loan)					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	hanic's lien)				
At least one of the debtors and and						
☐ Check if this claim relates to a community debt	Other (including a right to offset)	First Mortgag	ge			
3						
Date debt was incurred 8/2006	Last 4 digits of account number	er 9060				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Deb	tor 1 Gregrory Lee Schroede	•	Case number (if known)	20-30611-JDA	
	First Name Middle N		,	20 00011 0271	
Deb	tor 2 Sarah Jean Schroeder				
	First Name Middle N	ame Last Name			
2.3	PNC Mortgage	Describe the property that secures the claim:	\$34,980.08	\$118,800.00	\$0.00
	Creditor's Name	3404 W. Frances Rd. Clio, MI			
		48420-8537 Genesee County			
	The Towner at PNC Plaza	As of the date you file, the claim is: Check all that			
	300 Fifth Avenue	apply.			
	Pittsburgh, PA 15222	☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
_	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a community debt	Other (including a right to offset) Second	Mortgage		
	debt was incurred	Last 4 digits of account number			
	<u> </u>				
2.4	Wells Fargo Dealer Services	Describe the property that secures the claim:	\$19,376.64	\$18,000.00	\$1,376.64
	Creditor's Name	2013 GMC Acadia 83732 miles VIN#1GKKVTKD4DJ163461			
	P.O. Box 997517	As of the date you file, the claim is: Check all that apply.	J		
	Sacramento, CA 95899	Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
_	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
Пο	Check if this claim relates to a	•	e Money Security		
•	community debt				
Date	debt was incurred 2/26/2020	Last 4 digits of account number			
Ad	d the dollar value of your entries in C	olumn A on this page. Write that number here:	\$163,023	.87	
		. •	T 1	1	
	his is the last page of your form, add ite that number here:	the dollar value totals from all pages.	\$163,023	87	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this info	rmation to identify your	case:			
Debtor 1	Gregrory Lee Sch	roeder			
	First Name	Middle Name	Last Name		
Debtor 2	Sarah Jean Schro	eder			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRIC	CT OF MICHIGAN		
Case number	20-30611-JDA				
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 106E/F				
	E/F: Creditors W	ho Have Uns	ecured Claims		12/15
Schedule G: Exe Schedule D: Cred eft. Attach the C name and case n	cutory Contracts and Unexp ditors Who Have Claims Sec ontinuation Page to this pag umber (if known).	ired Leases (Official Foured by Property. If mo ured by Property. If mo e. If you have no inforn	orm 106G). Do not include re space is needed, copy t	any creditors with partially se the Part you need, fill it out, no	operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your
	All of Your PRIORITY Un				
•	itors have priority unsecure	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims	.		
	itors have nonpriority unsec				
	nave nothing to report in this p			edules.	
Yes.	.a.oo.ag to repert in alle p				
unsecured cl	aim, list the creditor separately	/ for each claim. For eac	h claim listed, identify what t		has more than one nonpriority ms already included in Part 1. If more ims fill out the Continuation Page of
					Total claim
4.1 Ally F	inancial	Last 4	digits of account number	5921	\$15.00
Nonprio	rity Creditor's Name		·		
	enaissance Center #80) When w	vas the debt incurred?	7/2014	
	it, MI 48243 Street City State Zip Code	As of the	ne date you file, the claim i	s: Check all that apply	
	curred the debt? Check one.		,	,	
☐ Debt	tor 1 only	☐ Con	tingent		
☐ Debi	tor 2 only	☐ Unli	quidated		
■ Debi	tor 1 and Debtor 2 only	■ Disp	outed		
☐ At le	ast one of the debtors and and	other Type of	NONPRIORITY unsecured	d claim:	
☐ Che	ck if this claim is for a comr	munity	lent loans		
debt	laim subject to offset?	☐ Obli	gations arising out of a sepa s priority claims	ration agreement or divorce that	you did not
■ No	,	<u></u>	•	g plans, and other similar debts	
□ Yes				eficiency Balance on pr	evious

4.2	AmeriCollect/Probility Therapy Services	Last 4 digits of account number 2523	\$267.00
	Nonpriority Creditor's Name P.O. Box 1566 Manitowoc, WI 54221	When was the debt incurred? 3/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.3	Calvary Portfolio Services Nonpriority Creditor's Name	Last 4 digits of account number 2526	\$1,363.00
	P.O. Box 27288 Tempe, AZ 85285	When was the debt incurred? 2/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Retail Purchases	
4.4	Cambridge Credit Counseling Corp. Nonpriority Creditor's Name	Last 4 digits of account number 7802	\$0.00
	67 Hunt St. Agawam, MA 01001	When was the debt incurred? 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	■ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	■ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Contingent Damages, if any, arising from the rejection of executory contract for credit consolidation.	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	r 1 Gregrory Lee Schroeder Sarah Jean Schroeder		Case number (if known) 20-	30611-JDA
4.5	Capital One Bank	Last 4 digits of account number	7805	\$2,172.00
	Nonpriority Creditor's Name 15000 Capital One Drive Richmond, VA 23238	When was the debt incurred?	5/2016	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that yo	u did not
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify Retail Purc	hases	
4.6	I.C. System, Inc./ATT Uverse Nonpriority Creditor's Name	Last 4 digits of account number	6207	\$358.00
	P,O. Box 64378	When was the debt incurred?	12/2018	
	Saint Paul, MN 55164 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that yo	u did not
	Is the claim subject to offset?	report as priority claims	manon agreement er arrenee mat ye	u u.u
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Retail Purc	hases	
4.7	Kohl's-Capital One Retail Account.	Last 4 digits of account number	9305	\$363.00
	Nonpriority Creditor's Name			
	N54 W13600 Woodale Drive	When was the debt incurred?	7/2016	
	Menomonee Falls, WI 53051 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	and also you me, and olum		
	Debtor 1 only	П о 		

☐ Contingent ■ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans $\hfill\square$ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Retail Purchases ☐ Yes

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	Gregrory Lee Schroeder Sarah Jean Schroeder		Case number (if known) 20-306	I1-JDA
4.8	M&M Credit	Last 4 digits of account number	4257	\$158.00
	Nonpriority Creditor's Name 6324 Taylor Drive	When was the debt incurred?	5/2016	
	Flint, MI 48507 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did	not
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Medical Se	ervices	
4.9	Midland Funding/Capital One Bank, N.A.	Last 4 digits of account number	7991	\$188.00
	Nonpriority Creditor's Name 320 E. Big Beaver Rd. Troy, MI 48083	When was the debt incurred?	4/2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sep	aration agreement or divorce that you did	not
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Retail Pure	chases	
4.1	Midland Funding/Synchrony Bank	1 4 4 dis-te 5 4	8080	\$497.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		437.00
	320 E. Big Beaver Rd. Troy, MI 48083	When was the debt incurred?	7/2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did	not

Official Form 106 E/F

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Retail Purchases & Legal Fees

Debtor 1	Gregrory Lee Schroeder		
Debtor 2	Sarah Jean Schroeder	Case number (if known)	20-30611-JDA

Midland Funding/Synchrony Bank	Last 4 digits of account number 8104	\$719.00
Nonpriority Creditor's Name 320 E. Big Beaver Rd.	When was the debt incurred? 9/2018	
Troy, MI 48083 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Retail Purchases	
Midwest Receivables/Binson's Home Health	Last 4 digits of account number XXXX	\$1,103.00
Nonpriority Creditor's Name	Last 4 digits of account number	V 1,100.00
2323 Gull Rd. Ste. E Kalamazoo, MI 49048	When was the debt incurred? 6/2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Services	
Midwest Receivables/Greater Flint	Last 4 digits of account number 0074	\$58.00
Image. Nonpriority Creditor's Name	Last 4 digits of account number	
2323 Gull Rd. Ste. E	When was the debt incurred? 3/2018	
Kalamazoo, MI 49048 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Services	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Navient	Last 4 digits of account number	1667	\$6,1
Nonpriority Creditor's Name 123 S. Justison St. Wilmington, DE 19801	When was the debt incurred?	9/2006	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Student loans		
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify		
	Student Lo	 an	
			
Navient	Last 4 digits of account number	1667	\$4,8
Nonpriority Creditor's Name			+ -,-
123 S. Justison St.	When was the debt incurred?	9/2206	
Wilmington, DE 19801			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	П		
☐ Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		aration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
	Student Lo	an	
Portfolio Recovery Associates	Last 4 digits of account number	5691	\$1
Nonpriority Creditor's Name			
150 Corporate Blvd.	When was the debt incurred?	9/2018	
Norfolk, VA 23502			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	

☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Retail Purchases ☐ Yes

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	0.5		0.5		Total Claim
Total claims	6f.	Student loans	6f.	\$_	10,947.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

		Lee Schroeder an Schroeder	Case nu	ımber (if known)	20-30611-JDA	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	7,455.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	18,402.00	

Fill in this infor	mation to identify your	case:			
Debtor 1	Gregrory Lee Sch	nroeder	_		
	First Name	Middle Name	Last Name		
Debtor 2	Sarah Jean Schro	peder			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN		
Case number	20-30611-JDA				
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name. Number. Street. City. State and ZIP Code

State what the contract or lease is for

Cambridge Credit Counseling Corp.67 Hunt St.Agawam, MA 01001

Executory Contract for Debt Consolidation Services

Fill in this in	formation to identify your	case:			
Debtor 1	Gregrory Lee Sc First Name	hroeder Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Sarah Jean Schr First Name	oeder Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case number	20-30611-JDA				☐ Check if this is an amended filing
	Form 106H I <mark>le H: Your Co</mark> d	ebtors			12/15
people are fil fill it out, and your name ar	ing together, both are equ	ally responsible for sup boxes on the left. Attac). Answer every question	plying correct information h the Additional Page to t n.	n. If more space is no his page. On the top	te as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
	n the last 8 years, have yo California, Idaho, Louisiana				states and territories include
	o to line 3. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line 2	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guaraı	ntor or cosigner. Make su	re you have listed th	ywith you. List the person shown e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
	lumn 1: Your codebtor ne, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
63	rry Lynn White 10 Miller Rd. ger, MI 48610			■ Schedule D, lin □ Schedule E/F, □ Schedule G Chrysler Capital	line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Best Case Bankruptcy 20-30611-jda Doc 13 Filed 03/19/20 Entered 03/19/20 14:00:12 Page 27 of 32

Fill in this information to	o identify your case:	
Debtor 1	Gregrory Lee Schroeder	
Debtor 2 (Spouse, if filing)	Sarah Jean Schroeder	
United States Bankrup	tcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number (If known)	30611-JDA	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Surgical Instrument **Provider Enrollment Specialist** Occupation Technician Include part-time, seasonal, or self-employed work. Employer's name **Stryker Sales Corporation IHA Health Services Corporation** Occupation may include student or homemaker, if it applies. **Employer's address** 24 Frank Lloyd Wright Drive 2825 Airview Blvd. Portage, MI 49002 Ann Arbor, MI 48106-0446 How long employed there? 16 Years 15 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

Case number (if known)

20-30611-JDA

Separation Sepa					Fo	r Debtor 1		Debtor 2 or -filing spouse	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for terment plans 5c. Voluntary contributions for the plantary contribution for the plantary contribution for the plantary received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 6c. Family support payments that you, a non-filling spouse, or a dependent regularly received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 6d. Unemployment compensation 6d. Voluntary received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 6d. Unemployment compensation 6d. Voluntary received include cash assistance that you receive, such as food slamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 6d. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food slamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other monthly income. Add line 7 + line 9. 6d. Other m		Сору	line 4 here	4.	\$	6,480.00			
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regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Tooled. Combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies					\$_	0.00	\$	0.00	
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8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 9h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.					· -				
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9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$		8g.	Pension or retirement income	 8g.	\$	0.00	\$	0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?		8h.	Other monthly income. Specify:	_ 8h.+	- \$	0.00	+ \$	0.00	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.	9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No.	10.			10. \$		4,909.00 + \$_	2,1	54.00 = \$	7,063.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{7,06}{Combined monthly incompleted on the Summary of Certain Liabilities and Related Data, if it applies No.	11.	Include other Do no	de contributions from an unmarried partner, members of your household, your friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not a	depen		•			0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No.	12.	Write	that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$	7,063.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No.									
Von Eveloin:	13.	Do yo		?				montnly	iricome
Tes. Explain.			Yes. Explain:						

Sill	in this information to identify your case:				
Deb			Check	c if this is:	
	Gregiory Lee Schloeder	<u> </u>		An amended filing	
	tor 2 Sarah Jean Schroeder buse, if filing)				ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIG	AN	<u> </u>	MM / DD / YYYY	
	e number 20-30611-JDA nown)				
Of	fficial Form 106J				
Be info	chedule J: Your Expenses as complete and accurate as possible. If two married people are branation. If more space is needed, attach another sheet to this table (if known). Answer every question.	e filing together, bo form. On the top of	oth are equa any additio	lly responsible fonal pages, write y	12/15 or supplying correct your name and case
Par 1.	t 1: Describe Your Household Is this a joint case?				
١.	□ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2	·				
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		5	■ Yes
		-		4.0	□ No
		Daughter		10	■ Yes □ No
		Cousin's Daug	hter	19	■ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No ☐ Yes				
exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your say of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Y ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues		4c. \$		250.00
5.	Additional mortgage payments for your residence, such as hor	me equity loans	4d. \$ 5. \$	-	0.00 0.00
	Joan Toolage payments for Joan Toolage Good as Hol		σ. ψ		9.00

Official Form 106J Schedule J: Your Expenses 20-30611-jda Doc 13 Filed 03/19/20 Entered 03/19/20 14:00:12 Page 30 of 32

	tor 1		Lee Schroeder			20 20C44 IDA
Deb	tor 2	Sarah Je	an Schroeder	Case num	ber (if known)	20-30611-JDA
6.	Utilit				•	
	6a.	-	heat, natural gas	6a.	·	596.00
	6b.	-	ver, garbage collection	6b.	· -	0.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	· ·	549.00
_	6d.	Other. Spe	·	6d.	·	0.00
7.			ekeeping supplies	7.		850.00
8.			hildren's education costs	8.	\$	480.00
9.		•	ry, and dry cleaning	9.	\$	100.00
			roducts and services	10.	· -	100.00
			ntal expenses	11.	\$	50.00
12.			Include gas, maintenance, bus or train fare. ar payments.	12.	\$	800.00
13.			clubs, recreation, newspapers, magazines, and books	13.	·	100.00
			ributions and religious donations	14.	·	0.00
		rance.			·	0.00
			surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	220.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.	Taxe Spec		clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.			ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	·	411.00
			ents for Vehicle 2	17b.	· -	0.00
		Other. Spe	-	17c.	·	0.00
		Other. Spe	•	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not report as		\$	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form 106I). s you make to support others who do not live with you.	10.	\$	
19.	Spec		s you make to support others who do not live with you.	19.	Ψ	0.00
20			erty expenses not included in lines 4 or 5 of this form or on Sche		ur Income	
20.			s on other property	20a.		0.00
		Real estat		20b.	· ·	0.00
	20c.	Property, I	nomeowner's, or renter's insurance	20c.	·	0.00
			ice, repair, and upkeep expenses	20d.	·	0.00
			er's association or condominium dues	20e.		0.00
21		r: Specify:	Vehicle Maintenance	21.		100.00
	• • • • • • • • • • • • • • • • • • • •	,,, open,,	Vernote mantenance			100.00
22.			monthly expenses			
		Add lines 4	•		\$	4,606.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	4,606.00
23.	Calc	ulate your ı	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	•	7,063.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	4,606.00
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	2,457.00
24.	For ex	ou expect a xample, do yo ication to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	ou file this	form?	
	□Y€	es.	Explain here:			
						

Official Form 106J Schedule J: Your Expenses 20-30611-jda Doc 13 Filed 03/19/20 Entered 03/19/20 14:00:12 Page 31 of 32

Fill in this inform	mation to identify your	case:		
Debtor 1	Gregrory Lee Sch	roeder		
	First Name	Middle Name	Last Name	
Debtor 2	Sarah Jean Schro	oeder		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number	20-30611-JDA			
(if known)	20 00011 05%			☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	Declaration, and dignature (Cincian Cini 118)
hat they are true and correct. X /s/ Gregrory Lee Schroeder	d the summary and schedules filed with this declaration and X _/s/ Sarah Jean Schroeder
hat they are true and correct.	d the summary and schedules filed with this declaration and

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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